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TRANSM FOR (to be used for all correspond	ITTAL M dence after initial filing)	Application Number Filing Date First Named Inventor Art Unit Examiner Name Attorney Docket Number	Februa Stephel LIN, Ke	formation unless it ,962 ry 8, 2002 n B. SUTHEF	J.S. DEPARTMENT OF COMMERCE displays a valid OMB control number. RLAND et al
Fee Transmittal Form		Drawing(s)	ill that apply		Allowance Communication to TC
Fee Attached Amendment/Reply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Document(s)		Petition Petition to Convert to a Provisional Application Power of Attorney, Revocat Change of Correspondence Terminal Disclaimer Request for Refund CD, Number of CD(s) Landscape Table on C	Address	of Appea Appea (Appea (Appea) Proprie Status Other below) 1. Affidav 2. Certifie	
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Name					
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